

Dear Evaluator:

Your recommendation is sought for an applicant to the Pharmacology Research Associate (PRAT) Program of the National Institute of General Medical Sciences. In selecting candidates, reviewers depend greatly upon advice from people who have been associated with the applicant. Therefore, we are asking you to provide information on the enclosed form (NIH 2721-2). Individuals selected for this highly competitive program should have both meritorious scientific qualifications and outstanding personal character. Your frank evaluation will be valuable in determining the applicant's suitability for this program.

It is strongly encouraged to provide an additional letter. More detailed information on the applicant can be extremely helpful in the selection process. Under the provisions of the Privacy Act, the information you provide may be disclosed to the applicant upon request. If there is significant information which you feel you cannot provide without a pledge of confidentiality, please feel free to contact either one of us by telephone at (301) 594-3583.

We must receive the mailed materials by Friday, December 16 (COB), 2005. Please send to:

PRAT Program Assistant
NIGMS, NIH
Room 2AS-43D
45 Center Drive, MSC 6200
Bethesda, Maryland 20892-6200

Alternatively, you may transmit this to us by email as an attached file to PRAT@NIGMS.NIH.GOV or by FAX at (301) 480-2802.

Sincerely yours,

Pamela A. Marino, Ph.D.
PRAT Program Co-Director

Richard T. Okita, Ph.D.
PRAT Program Co-Director

U.S. Department of Health and Human Services
Public Health Service – National Institutes of Health**Pharmacology Research Associate Training (PRAT) Program****Request for Evaluation of Applicant****Instructions:**Type or print clearly in black ink. This form MUST be received by
January 13 (COB), 2006Name of Applicant (*Last, first, middle*)

This form is NOT CONFIDENTIAL

1. What is your estimation of the candidate's motivation and potential for
research?*Comments:*

- ☐ Best you've ever seen ☐ Among the upper third
- ☐ Among the top few ☐ Average
- ☐ Among the top 5-10% ☐ Below Average

2. How apt a scholar is the applicant? Consider such things as class standing,
grades, scholarship honors, special honors, special training or any other
factors known to you which you deem pertinent.*Comments:*

- ☐ Best you've ever seen ☐ Among the upper third
- ☐ Among the top few ☐ Average
- ☐ Among the top 5-10% ☐ Below Average

Class standing, if known to you

Do you think the applicant's class standing accurately reflects scholastic
abilities in the disciplines particularly pertinent to biological research?*Comments:*

- ☐ Yes
- ☐ No

3. Please grade the candidate with respect to the qualities set forth in the table below. (*For each quality, check one rating*)

QUALITY	NO BASIS FOR JUDGEMENT	BEST YOU'VE EVER SEEN	TOP FEW	UPPER 10%	UPPER THIRD	AVERAGE	BELOW AVERAGE
a. Initiative							
b. Sustained hard work							
c. Rapport with preceptors							
d. Rapport with co-workers							

4. What are the main strengths and assets which this applicant would have as an NIH Pharmacology Research Associate?

5. What are the defects or weaknesses which in your judgment might limit applicant's effectiveness as an NIH Pharmacology Research Associate?

6. How long have you known this applicant?

7. Additional information, in the form of a letter, would be helpful.

8. Recommendation: ☐ Highly ☐ Qualified and competent ☐ Reservation ☐ Not Recommended

Name of Evaluator

Position

University, Medical School or Hospital (name and mailing address)

Office Phone No. (area code, number, and extension)

Evaluator's Signature

Date

Public reporting burden for this collection of information is estimated to average 105 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, MSC 7974, Bethesda, ME 20892-7974., ATTN: PRA (0925-0378). Do not return the completed form to this address.

NIH 2721-2 (8/04)